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CONFIRMATION NO. 1550

<b>SERIAL NUMBER</b> 10/626,185	<b>FILING OR 371(c) DATE</b> 07/24/2003 <b>RULE</b>	<b>CLASS</b> 713	<b>GROUP ART UNIT</b> 2137	<b>ATTORNEY DOCKET NO.</b> S30.12-0006	
<b>APPLICANTS</b> Mira Kristina LaCous, Eagan, MN; <b>** CONTINUING DATA *****</b> <i>Yes 17-6</i> This appln claims benefit of 60/398,419 07/25/2002 <b>** FOREIGN APPLICATIONS *****</b> <i>No 17-6</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 03/22/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>8 Jigech-7-6</i> Acknowledged <i>Examiner's Signature</i> Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 48	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 27367					
<b>TITLE</b> Trusted biometric device					
<b>FILING FEE RECEIVED</b> 669	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		